PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10188631

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			30					RATE	FEE	7.	RATE	FEE
FC	OR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	
TC	TAL CHARGE	ABLE CLAIMS	40 mir	nus 20=	. 10			X\$ 9=		OR	X\$18=	180
INE	DEPENDENT C	LAIMS	g mi	nus 3 =	* 0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		1	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2	Į	TOTAL	·	OR OR	TOTAL	150
CLAIMS AS AMENDED - PART II							TOTAL	Ļ	JON	OTHER	<u> </u>	
	r <u> </u>	(Column 1)	,	(Colum		(Column 3)	1 's	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		Ė		X\$ 9=	•	OR	X\$18=	-
AME	Independent	*	Minus			=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TOTAL			TOTAL ADDIT, FEE	
		(Column 1)		. "	ADDIT. FEE		,	ADDII. FEE				
AMENDMENT B	-	CLAIMS REMAINING AFTER AMENDMENT	IG NUME PREVIO		ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	01.414.4	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	. "
								TOTAL DDIT. FEE		OR 2	TOTAL ODIT. FEE	
				_								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	·	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									· .	OR A	TOTAL DDIT. FEE	
T	rtne "Highest Nur he "Highest Num	mber Previously Pa ber Previously Paid	id For" IN THIS I For" (Total or	SPACE is Independer	less than it) is the l	3, enter "3." highest number			opriate box		•	